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| PICK-UP              | ☐ WAIT ☐ MAIL           |
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| (1                   | Business Entity Name)   |
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|                      | Daniel Alice In A       |
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| Certified Copies     | Certificates of Status  |
| Special Instructions | to Filing Officer:      |
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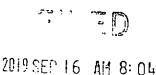
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C. GOLDEN SEP 2.7 2019

## **COVER LETTER**

|   | Registration So<br>Division of Cor |   |   |  |
|---|------------------------------------|---|---|--|
| eun irzy                                      |                                    | ACION G & M INTERNACIO                          | NAL LLC   |  |
| SUBJEC <sup>*</sup>                           | l:                                 | Name of Lim                                     | ited Liability Company  |  |
| The enclo                                     | sed Articles of                    | Amendment and fee(s) are sub                    | mitted for filing.  |  |
| Please rett                                   | urn all correspo                   | ondence concerning this matter                  | to the following:   |  |
|   |                                    | THAMARA PEREZ                                   |   |  |
|   | 1                                  |   | Name of Person  | <del> </del>   |
|   |                                    | TABADESA ASSOCIAT                               | ES INC  |  |
|   |                                    | -   | Firm/Company  |  |
|   |                                    | 419 W 49 ST STE 111                             |   |  |
|   |                                    |   | Address   |  |
|   |                                    | HIALEAH, FL 33012                               |   |  |
|   |                                    |   | City/State and Zip Code   |  |
|   |                                    | TAMMYP@TABADESA.                                |   |  |
|   |                                    |   | to be used for future annual report no                              | tification)  |
| hor further                                   | r information c                    | oncerning this matter, please c                 | all:  |  |
| THAMARA PEREZ                                 |                                    | 305 558-0622<br>at ()                           |   |  |
|   | Name o                             | f Person  |   | me Telephone Number  |
| Enclosed i                                    | is a check <sub> </sub> for tl     | ne following amount:                            |   |  |
| <b>≅</b> \$25.00                              | ) Filing Fee                       | □ \$30.00 Filing Fee &<br>Certificate of Status | □ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAILING ADDRESS:                              |                                    |   | RIER ADDRESS:   |  |
| Registration Section Division of Corporations |                                    | Registration Sect<br>Division of Corp           |   |  |
|   |                                    | ox 6327<br>assee, FL 32314                      | Clifton Building<br>2661 Executive C<br>Tallahassee, FL I           |  |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CORPORACION G & M INTERNACIONAL LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{11/19/13}{11/19/13}$ and assigned Florida document number 1.13000162447 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | Name .                    | Address         | Type of Action  |
|--------------|---------------------------|-----------------|-----------------|
| MGR          | EMGY CAROL GARCIA MATERAN | 8815 NW 116 CT  |                 |
|              |                           | DORAL, FL 33178 | <b>■</b> Remove |
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|                 | <br>ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier<br>ay after the record is filed.<br> | - o          |
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| <br>E,          | Hafring  |              |
|                 | Signifiere of a member or authorized representative of a member  |              |
|                 | LE JOSEFINA MATERAN DE GARCIA  |              |

Page 3 of 3

Filing Fee: \$25.00